

**TOWN OF LEBANON BUILDING DEPARTMENT**  
**APPLICATION FOR BUILDING PERMIT**  
**SINGLE FAMILY, MULTI-FAMILY, ADDITIONS, COMMERCIAL, INDUSTRIAL STRUCTURES**  
**THIS PERMIT MUST BE COMPLETED IN FULL**

This application for permit is made pursuant to Section 107.0 of the Basic Building Code of the State of Connecticut and is to be used for all construction requiring a permit under said code. **THIS IS NOT A BUILDING PERMIT.** Any permit granted pursuant to this application will be valid for only the type of work noted on this application. Detailed plans and specifications must be submitted for all construction as determined by this office.

**1. STREET ADDRESS**

\_\_\_\_\_  
Assessor's Map/Block/Lot #: \_\_\_\_\_  
Zone: \_\_\_\_\_  
If subdivision:  
Name of Subdivision: \_\_\_\_\_  
Lot # \_\_\_\_\_ Section \_\_\_\_\_

**5. USE OF PROPOSED STRUCTURE:**

Single Family Residence (ie: cape, ranch, colonial): \_\_\_\_\_  
Multi-Family Dwelling (# of units): \_\_\_\_\_  
Commercial (building use): \_\_\_\_\_  
Addition: \_\_\_\_\_ Industrial: \_\_\_\_\_  
Other: \_\_\_\_\_

**2. OWNER:**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**6. STRUCTURE DIMENSIONS:**

Structure Width \_\_\_\_\_  
Structure Depth \_\_\_\_\_  
Structure Height \_\_\_\_\_  
Number of Stories \_\_\_\_\_  
1<sup>st</sup> Floor \_\_\_\_\_ sq. ft.

**7. GARAGE**

Dimensions: \_\_\_\_\_  
# of Bays: \_\_\_\_\_  
Attached \_\_\_\_\_ Detached \_\_\_\_\_  
Under House \_\_\_\_\_  
Bonus Room Above Gar \_\_\_\_\_

**3. CONTRACTOR: (copies of license & insurance required)**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_ Field Phone: \_\_\_\_\_  
License #: \_\_\_\_\_

**8. INTERIOR DETAILS: (please list all types)**

Exterior (i.e. vinyl/clapboard): \_\_\_\_\_  
Interior Flooring (i.e. carpet/tile): \_\_\_\_\_  
# of Bedrooms \_\_\_\_\_ # of Bathrooms \_\_\_\_\_  
Fireplace type (i.e.: wood/gas) \_\_\_\_\_  
Type of heat \_\_\_\_\_ Air Conditioning (circle)Y/N

**4. ARCHITECT/ENGINEER (if applicable):**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_ License # \_\_\_\_\_

**9. TYPE OF WORK:**

(permit fees will be valid only for the boxes checked)

\_\_\_\_\_ Foundation \_\_\_\_\_ Plumbing  
\_\_\_\_\_ Structural \_\_\_\_\_ Heating & Ventilation  
\_\_\_\_\_ Electrical

**PLEASE COMPLETE THE FOLLOWING ON THE GRAPH PROVIDED:****\*\* To be done in addition to submission of site plan \*\***

1. Approximate outline of proposed structure.
2. Distance from proposed structure to property line; if the lot is irregularly shaped, indicate approximate shape
3. Abutting streets
4. Location of well or water line
5. Driveway
6. Curtain drains, if any
7. Septic tank
8. Layout of leaching system
9. Any outstanding topographical features such as ledge, outcroppings, ponds, swamps, streams, gullies, steep slopes, large trees etc.

Rear Yard  
\_\_\_\_\_ feet

Side Yard  
\_\_\_\_\_ Feet

Side Yard  
\_\_\_\_\_ Feet

Front property line  
\_\_\_\_\_ feet

Indicate name of road that structure faces \_\_\_\_\_



I hereby certify that I am the owner or authorized agent of the owner of the property herein described. I will conform to the applicable requirements of the Basic Building Code and Public Health Code of the State of Connecticut, the Ordinances of the Town of Lebanon and to any requirements not specifically covered by these Codes and Ordinances, but deemed by the Building Official and/or Town Engineer to be essential for structural, fire, or sanitary protection. It is understood that neither the Town of Lebanon nor any authorized agent assumes any responsibility for construction or maintenance of any facility built under permit for which this application is made.

I grant permission to the Building Official and Assessor to enter the property to do required inspections. I hereby certify that the proposed work will conform to the Basic Building code and all other Codes as adopted by the State of Connecticut. I understand that under the Connecticut amendment of the Building Code, Section 119.1,  
**A CERTIFICATE OF OCCUPANCY/COMPLIANCE IS REQUIRED FOR ALL PERMITS ISSUED.**

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Applicant's Signature \_\_\_\_\_  
(If you are the Agent/Contractor check here) \_\_\_\_\_

Date of Application: \_\_\_\_\_

Estimated Cost of Proposed Structure: \$ \_\_\_\_\_

(this price *must* include foundation, structure, materials, labor and may or may not include plumbing, electrical, heating cost/materials – these may be paid at a later date – be sure *not* to include septic, well, excavation, gravel, land etc.)

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**BELOW THIS LINE IS FOR OFFICE USE ONLY!**

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Date Application Received: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Permit #: \_\_\_\_\_

Building Permit Fee: \$ \_\_\_\_\_

CT Educational Fee: \$ \_\_\_\_\_

Zoning Fee: \$ \_\_\_\_\_

BUILDING FEES: \$ \_\_\_\_\_ + SEPTIC FEES: \$ \_\_\_\_\_ = TOTAL DUE: \$ \_\_\_\_\_

Check List:

MEC Check \_\_\_\_\_

House Plans \_\_\_\_\_

Site Plan & Septic Application \_\_\_\_\_

Assessor's Card \_\_\_\_\_

Driveway Bond \_\_\_\_\_

Contractor's License/Insurance \_\_\_\_\_

Wetlands/Zoning Approvals \_\_\_\_\_

**TOWN OF LEBANON BUILDING DEPARTMENT**

579 Exeter Rd.,  
Lebanon, CT 06249  
Phone: 860-642-6028  
Fax: 860-642-2022

**OFFICIAL USE ONLY**

**PLANNING & ZONING  
COMMISSION**

Street Number \_\_\_\_\_

Zone \_\_\_\_\_

Permissible Use? \_\_\_\_\_

Dis/Approved on \_\_\_\_\_

By \_\_\_\_\_

COMMENTS:

**DIRECTOR OF HEALTH/  
SANITARIAN**

Dis/Approved on \_\_\_\_\_

By \_\_\_\_\_  
Director of Health/Sanitarian

Required Septic Tank  
Size: \_\_\_\_\_ gal.

Required Leaching  
Area \_\_\_\_\_ sq. ft.

**Final sewage disposal system – con-  
structed as shown in red. Well water  
Sample certificate and satisfactory  
Sample certificate and satisfactory  
report \_\_\_\_\_**

**ENGINEERING DEPARTMENT**

Dis/Approved on \_\_\_\_\_

By \_\_\_\_\_

COMMENTS:

PRELIMINARY:

Dis/Approved on \_\_\_\_\_

By \_\_\_\_\_  
Building Official

COMMENTS:

**PUBLIC SAFETY**

Dis/Approved on \_\_\_\_\_

By \_\_\_\_\_  
Fire Marshal

COMMENTS: